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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**In re U.S. Patent Application****NOZAKI *et al.*****Application 09/890,929****Filed: August 7, 2001****For: METHOD AND SYSTEM FOR
DISPLAYING DENDROGRAM****Attorney Docket No. HIRA.0038****Art Unit 1631****Examiner
Clow, Lori A.****Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450****COVER LETTER**

Sir:

☒ The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	26	26	(Over 20)	x \$50	0
Independent Claims	5	5	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)	4	4	PAID	+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED					
				TOTAL	0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

☒ Response to Office Action
(with claim amendments)☐ Substitute Abstract☐ Preliminary Amendment☐ Other _____☐ Petition for __ month Extension-of-Time☐ Terminal Disclaimer☐ Sequence Listing Statement☐ Sequence Listing☐ Sequence Listing Diskette _____

- [] Please charge my **Deposit Account Number** in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [] A check in the amount of \$ _____ to cover the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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